

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or deletions)

7590 06/23/2004

Julie Post
H.B. Fuller Company
1200 Willow Lake Blvd.
P.O. Box 64683
St. Paul, MN 55164-0683



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

| | |
|--------------------|--------------------|
| LeeAn Molin | (Depositor's name) |
| <i>LeeAn Molin</i> | (Signature) |
| 09/07/2004 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/050,375 | 01/15/2002 | Fouad D. Mehawej | DA-052-US-01 | 5750 |

TITLE OF INVENTION: SUPERADSORBENT THERMOPLASTIC COMPOSITION AND ARTICLE INCLUDING SAME

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|------------------------|--------------|----------------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 09/23/2004 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | | |
| NILAND, PATRICK DENNIS | 1714 | 523-200000 | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

| | |
|---|--|
| 1 | |
| 2 | |
| 3 | |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

H.B. Fuller Licensing & Financing Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

St. Paul, MN, USA

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-2241 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

LeeAn Molin September 7, 2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

09/07/2004 SDIRETR2 00000016 062241 10050375

01 FC:1501 1330.00 DA

02 FC:1504 300.00 DA

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Fouad D. Mehawej et al. Docket No. DA-052-US-01
Serial No. 10/050,375 Filing Date: 01/15/2002
Examiner: Patrick D. Niland Group Art Unit: 1714
Invention: **SUPERABSORBENT THERMOPLASTIC COMPOSITION AND
ARTICLE INCLUDING SAME**

I hereby certify that the following is being facsimile transmitted to the United States
Patent and Trademark Office to Fax. No. 703-746-4000:

1. Transmittal of Payment of Issue Fee, 1 page; and
2. Fee(s) Transmittal Form PTOL-85, 1 page.

09/07/2004
Date

Lee An Molin
Signature of Person Signing Certificate

LeeAn Molin
Typed or Printed Name of Person Signing Certificate

4 Pages

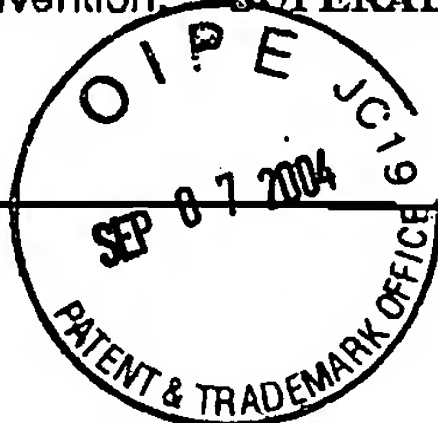
TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)
(37 C.F.R. 1.311)

Docket No.
DA-052-US-01

Applicant(s): Fouad D. Mehawej et al.

| Serial No. | Filing Date | Examiner | Group Art Unit | Confirmation No. |
|------------|-------------|--------------|----------------|------------------|
| 10/050,375 | 01/15/2002 | P. D. Niland | 1714 | 5750 |

Invention: SUPERABSORBENT THERMOPLASTIC COMPOSITION AND ARTICLE INCLUDING SAME



Mail Stop Issue Fee
TO THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1330.00 ☐ Design Fee: _____ ☐ Plant Fee: _____
- ☒ Publication Fee: \$ 300.00
- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 06-2241 as described below.
- ☒ Charge the amount of \$1,630.00
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

Signature

Dated: September 7, 2004

Allison A. Johnson, Reg. No. 36,173
on behalf of
H.B. Fuller, Patent Department
1200 Willow Lake Blvd.
P.O. Box 64683
St. Paul, MN 55164-0683
Phone: 612-925-8371
Fax: 612-925-8372

cc:

Certificate of Transmission by Facsimile
This certificate may only be used if paying
by deposit account.

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax 703-746-4000) on

09/07/2004
Date

Signature

LeeAn Molin

Typed or Printed Name of Person Signing Certificate

Certificate of Mailing by First Class Mail

I certify that this document and fee is being deposited with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence